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Bib Data Sheet

CONFIRMATION NO. 3035

<b>SERIAL NUMBER</b> 09/965,248	<b>FILING DATE</b> 09/28/2001 <b>RULE</b>	<b>CLASS</b> 714	<b>GROUP ART UNIT</b> 2184	<b>ATTORNEY DOCKET NO.</b> GSC 14,409-1	
<b>APPLICANTS</b> Susan K. Semancik, Snow Hill, MD; <i>MS</i> Annette M. Conger, Snow Hill, MD; <i>MS</i>					
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/235,912 09/28/2000 <i>MS</i>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/23/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>allowance</i> Verified and <i>MS</i> Acknowledged <i>MS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 21872					
<b>TITLE</b> Fail-over file transfer process					
<b>FILING FEE RECEIVED</b> 912	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		